

Secretary for Health and Family Services Final PDL Selections from Pharmacy and Therapeutics Advisory Committee

September 16, 2004 Meeting

This chart provides a summary of the final PDL selections that were made by the Secretary for Health and Family Services as a result of the Pharmacy and Therapeutics Advisory Committee meeting of September 16, 2004 resulting in recommendations and product supplemental rebate submissions.

Item	Description of Recommendations	P & T Vote
#1	<p>Beta Adrenergic Bronchodilators</p> <ol style="list-style-type: none"> 1. All short acting Beta-agonist agents are equivalent in efficacy and safety with the exception of metaproteranol when administered at comparable doses and all long acting Beta-agonist agents are equivalent in efficacy and safety when administered at comparable doses. 2. An oral extended-release formulation of albuterol should be available for those patients who cannot tolerate or use an inhaled long-acting beta-agonist agent. 3. Due to efficacy and safety concerns place a PA on metaproteranol (short acting beta-agonists). 4. Select the following for inclusion on the PDL: albuterol oral generic, albuterol inhaled generic, terbutaline oral generic, albuterol nebulized inhalation, Proventil HFA inhalation, Accuneb inhalation, Serevent Inhalation, and Xopenex Inhalation. 5. Place a PA requirement on the following: metaproterenol oral, Alupent Inhalation, Maxair Inhalation, Ventolin HFA inhaler, Vospire ER oral, Foradil Inhalation, metaproterenol inhalation. 6. Continue prior authorization for Xolair using current criteria from the September 18, 2003 P&T meeting. 7. For any new chemical entity in the Beta-agonist class, require a PA and quantity limit until reviewed by the P&T Advisory Committee. 	<p>Passed 8 - For 0 - Against ----- Recommendations approved with exception of Xopenex.</p> <p>PDL Selections: albuterol oral generic, albuterol inhaled generic, terbutaline oral generic, albuterol nebulized inhalation, Proventil HFA inhalation, Accuneb inhalation, Serevent Inhalation</p>
#2	<p>Inhaled Corticosteroids</p> <ol style="list-style-type: none"> 1. All inhaled oral corticosteroids are equivalent in efficacy when administered at comparable doses. 2. Select the following for inclusion on the PDL: Azmacort inhalation, Aerobid, Aerobid-M, QVAR inhalation, Flovent inhalation, Advair Diskus inhalation and Pulmicort Respules. 3. For any new chemical entity in the inhaled oral corticosteroids class, require a PA and quantity limit until reviewed by the 	<p>Passed 8 - For 0 - Against ----- Recommendations approved.</p> <p>PDL Selections: Azmacort inhalation, Aerobid, Aerobid-</p>

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Item	Description of Recommendations	P & T Vote
	P&T Advisory Committee.	M, QVAR inhalation, Flovent inhalation, Advair Diskus inhalation and Pulmicort Respules.
#3	Nasal Corticosteroids <ol style="list-style-type: none"> 1. The nasal corticosteroids are clinically equivalent. 2. Select the following for inclusion on the PDL: Nasarel, Flonase, Nasonex. 3. Require a PA on the following: Beconase AQ, Rhinocort Aqua, Nasacort AQ, flunisolide nasal. 4. Place a quantity limit of one inhaler unit per 30 day supply. 5. For any new chemical entity in the nasal corticosteroid class require a PA and quantity limit until reviewed by the P&T advisory Committee. 	Passed 8 – For 0 - Against Recommendations approved. PDL Selections: Nasarel, Flonase, Nasonex.
#4	Quinolones, 1st, 2nd and 3rd generation <ol style="list-style-type: none"> 1. Place all 1st, 2nd and 3rd generation quinolones on the PDL. 2. For any new chemical entity in the fluoroquinolone antibiotic class require a PA and quantity limit until reviewed by the P&T advisory Committee. 	Passed 8 - For 0 - Against Recommendations approved. PDL Selections: All agents reviewed.